
Company Full Certificated Name (Do not abbreviate and include any Commission approved
AKA/DBA/Fictitious Name, if applicable.)

Parent Company Name (if applicable; Do not abbreviate.)

WATER and/or SEWER ANNUAL REPORT

SMALL COMPANY

TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of
January 1 - December 31, _____

Please **choose one** of the following filing options:

☐ Public submission

☐ Non-Public submission (Highly Confidential / Filed Under Seal)
**For this filing to be considered Highly Confidential, additional
submission of materials is required pursuant to Commission rule
4 CSR 240-3.335 and/or 4 CSR 240-3.640, Section 392.210, RSMo.,
and/or Section 393.140, RSMo.**

**Instructions for Filling out Annual Report Forms
For Small Water and Sewer Utilities**

GENERAL INSTRUCTIONS

In examining the report form you will note there are various references requiring water information and sewer information on the same page.

If you have water operations only, you should complete all information for water utilities. Any requested information for sewer data should be clearly marked by you as Not Applicable (e.g., N.A.).

If you have sewer operations only, you should complete all information requested for sewer utilities. Any requested information for water data should be clearly marked by you as Not Applicable (e.g., N.A.).

If you are a joint utility in that you have both water and sewer operations, you shall fill out all parts of all pages completely to the best of your ability and belief utilizing the available information. You will note that all pages on Lines 1 and 2 require the year of the report and the company name. This must be completed on all pages.

If this document has been prepared by a third-party preparer, it is the responsibility of the company personnel attesting to the accuracy of document to review the document before submission to the Missouri Public Service Commission.

Questions about the annual report form or its contents may be submitted to: Joan Wandel (573) 751-4785 or by e-mail at joan.wandel@psc.mo.gov. The completed document should be submitted under EFIS (accessible from the Commission's web page <http://www.psc.mo.gov/>) or mailed to: Data Center, Missouri Public Service Commission, 200 Madison Street, Suite 100, P.O. Box 360, Jefferson City, MO 65102-0360.

This report is due on or before April 15th and is required to be filed on a calendar year basis pursuant to the Commission rules at 4 CSR 240-3.335 and/or 4 CSR 240-3.640. Failure to timely file this report could result in penalties up to \$100 for every day the report is late pursuant to Section 392.210, RSMo., and/or Section 393.140, RSMo.

INSTRUCTIONS for PAGE 1

On Line 2, provide the full company name as it appears on your certificate of convenience and necessity.

On Lines 3 and 4, provide the company address.

On Line 5, provide the company phone number and the e-mail address of the regulatory contact. If an e-mail address is not available please designate with "n/a".

On Lines 6 and 7, indicate the effective date(s) of the Order(s) in which the utility certificate(s) was granted and the associated MO Public Service Commission case number(s) for water and/or sewer service. The most current name change or merger case in which tariffs were modified should be designated here.

On Lines 8 through 12, provide names, addresses, phone numbers and e-mail addresses of any persons who can be contacted concerning information contained in this report.

On Lines 13 through 17, provide names, addresses, phone numbers and e-mail addresses of any persons who can be contacted concerning plant operations.

INSTRUCTIONS for PAGE 2

On Line 2, provide the full company name as it appears on your certificate of convenience and necessity.

On Lines 3 through 7, provide for each class and/or series of common and/or preferred stock the total number of shares authorized by charter, the par or stated value per share and the total number of shares issued.

On Lines 8 through 15, provide the names, addresses and number of votes resulting from stock ownership as of December 31. If any such holder held the stock in trust, state the nature of the trust and the beneficial owner.

On Line 16, provide total number of votes held by the names provided in lines 8 through 15.

On Line 17, provide the total number of votes of all securities with voting rights.

On Line 18, provide the total company and Missouri jurisdictional operating revenues. These amounts should include revenues from all tariffed services provided to customers. On Line 19, provide other revenues derived as a result of the utility company providing non-regulated services. On Line 20, provide the total of lines 18 through 19.

INSTRUCTIONS for PAGE 3

On Line 2, provide the full company name as it appears on your certificate of convenience and necessity.

Describe all transactions occurring during the year that will have a major effect on operations.

These transactions may be rate changes, the replacement of major equipment or any other abnormal cash expenditure amounting to \$250 or more. Please note that if the expenditure is of a normal and recurring nature (i.e., monthly electric bills), it should not be classified as an abnormal item.

INSTRUCTIONS for PAGE 4

The dollar amount for Lines 3, 4, 6, 10, 11 and 13 should be brought forward from the appropriate page and line as indicated.

Construction Work in Progress : Shall include the total amount of work for utility plant in process of construction but not ready for service at the end of the year.

Plant Held for Future Use : Shall include the original cost of property owned and held for future use under a definite plan for use.

Plant Acquisition Adjustment : Shall include the purchase price of any plant purchased less the original cost, estimated if not known, less any depreciation reserve.

INSTRUCTIONS for PAGE 5

The dollar amount for Lines 11, 12, 16 and 17 should be brought forward from the appropriate page and line as indicated.

Customer Deposits : Shall include all deposits with the utility by customers as security for payment of bills.

Advances for Construction : Shall include advances by any applicant for construction that is to be refunded either in part or completely.

Contributions in Aid of Construction (CIAC) : Shall include any donation or contribution in cash or services, or property from any company, individual, agency or others for construction purposes. All supporting entries shall be kept so that the utility can furnish information regarding the purpose of each donation, and the amount of the donation. (NOTE: There shall not be any advances for construction that are to be repaid in part or completely included in this account except if not returned by the time specified in the utilities tariff.)

NOTE: TOTAL ASSETS FROM PAGE 4 MUST BALANCE WITH TOTAL EQUITY AND LIABILITIES FROM PAGE 5

INSTRUCTIONS for PAGE 6

On Page 6, provide information for all customer sales determined to be uncollectible. You should identify the customer, the methods used to attempt collection, the amount and why it is uncollectible (i.e., customer filed bankruptcy, left town, etc.). This uncollectible amount is an expense to be recorded on the Income Statement (Page W-1 and/ or S-1).

INSTRUCTIONS for PAGE 7

On Page 7, provide information regarding payroll. Provide names, titles and salaries of all officers and employees. Provide total compensation paid to each during the year including bonuses and other allowances. Identify the total compensation as chargeable to water expense, sewer expense or construction. Also, identify any employee who did not receive any compensation during the year.

INSTRUCTIONS for PAGE 8

On Page 8, provide information regarding professional services the utility company received. Report all information concerning rate, management, construction, engineering, research, financial, valuation, legal, accounting, purchasing, advertising, labor relations, public relations, or other similar professional services rendered the respondent under written or verbal arrangements, for which total payments during the year to any corporation, partnership, individual (other than for services as an employee), or organization of any kind whatsoever.

INSTRUCTIONS for PAGE 9

On Page 9, provide information regarding contributions in aid of construction and the amortization of contributions in aid of construction. This account shall include donations or contributions in cash, services, or property for construction purposes. The records supporting the entries to this account shall be so kept that the utility can furnish information as to the purpose of each donation, the conditions, if any, upon which it was made, the

INSTRUCTIONS for PAGE 10

On Page 10, provide all required information concerning interest expense, notes payable, bonds, bank loans and other financial debts that existed during the year. For each debt on which interest was paid during the year, provide the name and address of the lender, the date of maturity, the loan balance, the interest rate on the loan and the amount of interest paid. The amount of interest paid should be assigned to water utility expense and/or sewer utility expense based upon which utility was responsible for the loan.

INSTRUCTIONS for PAGE 11

On Page 11, provide descriptions, quantities and dollar costs of materials and supplies in inventory. These items may be pipe, wire, gasoline, diesel, etc. You should identify the cost and assign the cost to either water or sewer.

INSTRUCTIONS for PAGES W-1, W-2, W-3 and/or S-1, S-2, S-3

On Pages W-1, W-2, W-3 and/or S-1, S-2, S-3, provide information regarding all billed revenues, expenses, customer numbers and gallon sales.

INSTRUCTIONS for PAGE W-4

On Page W-4, provide information regarding quantities of water from each source of supply that entered the system. On Line 21, provide data regarding the maximum and minimum quantities of water supplied in any one day. On Line 22, provide the range of pressures that exist at the highest point of the system. On Lines 23 thru 26, provide information regarding any sale of water for resale.

INSTRUCTIONS for PAGES W-5, W-6 and/or S-4, S-5

On Pages W-5, W-6 and/or S-4, S-5, provide information regarding water and/or sewer utility plant-in-service, depreciation expense and depreciation reserve. Columns C, D, E and F require original cost plant-in-service, plant additions and plant retirements. These entries should be supported by books and records, which identify the property and its location. Column G should identify the depreciation rates used. Depreciation rates prescribed by Commission Order must be used, if available. Column H is the depreciation expense calculated using end of year plant-in-service (Column F). The depreciation reserve is reflected in Columns I, J, K, L, M and N. Please note that Columns D and I should reflect the same amounts.

INSTRUCTIONS for PAGE W-7

On Page W-7, provide historical and statistical information regarding water pumps and wells.

INSTRUCTIONS for PAGE W-8

On Page W-8, provide historical and statistical information regarding water meters, meter settings and storage facilities.

INSTRUCTIONS for PAGE W-9

On Page W-9, provide historical information regarding the feet of water mains and number of service lines by size and type.

INSTRUCTIONS for PAGE S-6

On Page S-6, provide historical and statistical information regarding sewer treatment facilities, lift stations and feet of collecting sewers by size and type.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

Parent Company Name:
(if applicable) _____

3 Company Street Address: _____

4 Company Mailing Address: _____

5 Company Phone Number: _____

Company E-mail

Address *: _____

Is the utility certificated to provide **water** service in Missouri? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff effected):

6 Effective Date (e.g. 00/00/0000) _____

Case No. _____

Is the utility certificated to provide **sewer** service in Missouri? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff effected):

7 Effective Date (e.g. 00/00/0000) _____

Case No. _____

Name, address, phone number and e-mail of person(s) to contact concerning information contained in this report:

8

Name

Name

9

Mailing Address

Mailing Address

9a

Street Address

Street Address

10

City

State

Zip

City

State

Zip

11

Telephone Number

Telephone Number

12

E-mail Address*

E-mail Address*

Name, address, phone number and e-mail of person(s) to contact concerning plant operations:

13

Name

Name

14

Mailing Address

Mailing Address

14a

Street Address

Street Address

15

City

State

Zip

City

State

Zip

16

Telephone Number

Telephone Number

17

E-mail Address*

E-mail Address*

* Required to be provided, if available. State N/A (not available) if no email is available.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

CAPITAL STOCK (COMMON AND DEFERRED)

| | Class and Series of Stock (a) | Number of Shares Authorized (b) | Par or Stated Value Per Share (c) | Number of Shares Issued (d) |
|---|----------------------------------|--|--|--------------------------------------|
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |

SECURITY HOLDERS AND VOTING POWERS

Report below the NAMES and ADDRESS of the ten stockholders who, at the end of the year, had the greatest voting powers in the respondent. AND STATE THE NUMBER OF VOTES each would have had a right to cast on that date. If any such holder held in trust, give the nature of the trust and the beneficial owner. Show also total votes of ALL securities with voting powers.

| | Names and Addresses (a) | Number of Votes (b) |
|----|----------------------------|------------------------|
| 8 | | |
| 9 | | |
| 10 | | |
| 11 | | |
| 12 | | |
| 13 | | |
| 14 | | |
| 15 | | |

16 Total Number of Votes Held by Above _____

17 Total Number of Votes of all Securities with Voting Powers _____

Please provide the total company **and** gross intrastate operating revenues (i.e. Missouri Jurisdictional) Revenues for the Calendar Year:

Revenues:

| | Total Company | MO Jurisdictional |
|--|---------------|-------------------|
| 18 Operating Revenues from Tariffed Services | | |
| 19 Other Revenues | | |
| 20 TOTAL REVENUES | | |

Operating revenues from MO Jurisdictional should match Statement of Revenue (MoPSC Assessment).

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

Describe MAJOR transactions occurring during the year which will have a major effect on operations, such as rate changes, replacement of equipment and other abnormal cash expenditures of \$250 or more.

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

11 _____

12 _____

13 _____

14 _____

15 _____

16 _____

17 _____

18 _____

19 _____

20 _____

21 _____

22 _____

23 _____

24 _____

25 _____

27 _____

28 _____

29 _____

30 _____

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

BALANCE SHEET
WATER AND SEWER OPERATIONS
ASSETS

| | Account Description (a) | Amount (b) |
|----|---|---------------|
| 3 | Water Plant In Service (From Pg. W-5) | |
| 4 | LESS: Water Depreciation Reserve (From Pg. W-6) | |
| 5 | Net Water Plant in Service (ie., Water Plant In Service MINUS Water Depreciation Reserve) | \$ - |
| 6 | Water Materials and Supplies (From Pg. 11) | |
| 7 | Water Construction Work in Progress | |
| 8 | Water Plant Held for Future Use * | |
| 9 | Water Plant Acquisition Adjustment | |
| 10 | Sewer Plant in Service (From Pg. S-4) | |
| 11 | LESS: Sewer Depreciation Reserve (From Pg. S-5) | |
| 12 | Net Sewer Plant in Service (ie., Sewer Plant in Service MINUS Sewer Depreciation Reserve) | \$ |
| 13 | Sewer Materials and Supplies (From Pg. 11) | |
| 14 | Sewer Construction Work in Progress | |
| 15 | Sewer Plant Held for Future Use * | |
| 16 | Sewer Plant Acquisition Adjustment | |
| 17 | Other Plant * | |
| 18 | Cash | |
| 19 | Other Assets (Accounts Receivable, etc.) * | |
| 20 | Total Assets** | \$ |

* Please attach a detailed explanation for these items.

** Total Assets should balance with Total Equity and Liabilities on Page 5 (see instructions).

2 Company Name: _____

BALANCE SHEET
WATER AND SEWER OPERATIONS
EQUITY AND LIABILITIES

| | Account Description (a) | Amount (b) |
|----|--|---------------|
| 3 | Capital Stock | |
| 4 | Retained Earnings | |
| 5 | Long-Term Debt to Affiliates (owners, other owner controlled companies, etc.) | |
| 6 | Short-Term Debt to Affiliates (owners, other owner controlled companies, etc.) | |
| 7 | Long-Term Debt (banks, etc.) | |
| 8 | Short-Term Debt (banks, etc.) | |
| 9 | Water Customer Deposits | |
| 10 | Water Advances for Construction | |
| 11 | Water CIAC (From Pg. 9) | |
| 12 | LESS: Water Amortization of CIAC (From Pg. 9) | |
| 13 | Net Water CIAC (ie., Water CIAC MINUS Water Amortization of CIAC) | \$ |
| 14 | Sewer Customer Deposits | |
| 15 | Sewer Advances for Construction | |
| 16 | Sewer CIAC (From Pg. 9) | |
| 17 | LESS: Sewer Amortization of CIAC (From Pg. 9) | |
| 18 | Net Sewer CIAC (ie., Sewer CIAC MINUS Sewer Amortization of CIAC) | \$ |
| 19 | Deferred Taxes - ITC | |
| 20 | Deferred Taxes - Other * | |
| 21 | Other Liabilities (Accounts Payable, etc.) * | |
| 22 | Total Equity and Liabilities** | \$ |

* Please attach a detailed explanation for these items.

** Total Equity and Liabilities should balance with Total Assets on Page 4 (see instructions).

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SCHEDULE OF UNCOLLECTIBLE ACCOUNTS

| Account No. (a) | Describe customer account and methods used to attempt collection. Also, state why account is deemed uncollectible (bankruptcy, etc.) (b) | Amount Written Off | |
|-----------------------|---|---------------------------------|---------------------------------|
| | | Water Utility (c) | Sewer Utility (d) |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |
| 21 | | | |
| 22 | | | |
| 23 | | | |
| 24 | | | |
| 25 | | | |
| 26 | | | |
| 27 | | | |
| 28 | | | |
| 29 | | | |
| 30 | | | |
| 31 | Total | \$ (Total to Pg. W-1) | \$ (Total to Pg. S-1) |

PAYROLL INFORMATION

INSTRUCTIONS: Please provide names, titles and salaries for all officers and employees. Show total compensation paid to each during the year. Include all amounts including bonuses and other allowances. Enter "0" or none where applicable. Provide explanations where necessary. Use additional sheets if necessary.

| Name and Title (a) | Payroll Charged To: | | | |
|-----------------------|--------------------------------------|-------------------------|-------------------------|-------------------------------|
| | Total Utility Compensation (b) | Water Expense (c) | Sewer Expense (d) | Capitalized Payroll (e) |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Total | \$ | \$ | \$ | \$ |
| | | (Total to Page W-1) | (Total to Page S-1) | |

1 For the calendar year of January 1 - December 31, _____

2 Company Name: _____

For the calendar year of January 1 - December 31,

Page 8

2 Company Name: _____

CONTRIBUTIONS IN AID OF CONSTRUCTION

INSTRUCTIONS: This account shall include donations or contributions in cash, services, or property for construction purposes. The records supporting the entries to this account shall be so kept that the utility can furnish information as to the purpose of each donation, the conditions, if any, upon which it was made, the amount of each donation, and the amount applicable to each utility department. The credits (deductions) to this account shall not be transferred to any other account without the approval of the Commission.

| (a) | | Water (b) | Sewer (c) |
|-----|---|------------------|------------------|
| 3 | Balance at First of Year | | |
| 4 | PLUS: Additions During the Year (Please provide a detailed explanation.) | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | Total Additions | \$ | \$ |
| 11 | LESS: Deductions During the Year (Please provide a detailed explanation.) | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | Total Deductions | \$ | \$ |
| 17 | Balance at End of Year | \$ | \$ |
| | | (Total to Pg. 5) | (Total to Pg. 5) |

AMORTIZATION OF CONTRIBUTIONS IN AID OF CONSTRUCTION

(Please identify as Account Number 271A)

| (a) | | Water (b) | Sewer (c) |
|-----|--|------------------|------------------|
| 18 | Balance at First of Year (Total of Amortization <u>not</u> Total of CIAC line 3) | | |
| 19 | Total Contributions in Aid at End of Year (see above) | | |
| 20 | Total Plant in Service at End of Year (From Page W-5 or S-4) | | |
| 21 | Percentage Contributions to Plant | % | % |
| 22 | Total Depreciation Expense (From Page W-6 or S-5) | | |
| 23 | Total Amortization of Contributions | \$ | \$ |
| 24 | Balance at End of Year | \$ | \$ |
| | | (Total to Pg. 5) | (Total to Pg. 5) |

1

2 Company Name:

For the calendar year of January 1 - December 31,

Page 10

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SCHEDULE OF MATERIALS AND SUPPLIES AVAILABLE AT THE END OF THE YEAR

| | Description of Items (Pipe, Meters, Fittings, Valves, Gas, etc.) (a) | Water | | Sewer | |
|----|--|-----------------|------------------|-----------------|------------------|
| | | Quantity (b) | Amount (c) | Quantity (d) | Amount (e) |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
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| 19 | | | | | |
| 20 | | | | | |
| 21 | | | | | |
| 22 | | | | | |
| 23 | | | | | |
| 24 | | | | | |
| 25 | Total | | \$ | | \$ |
| | | | (Total to Pg. 4) | | (Total to Pg. 4) |

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

WATER OPERATING REVENUES, EXPENSES AND STATISTICS

| (a) | Amount (b) |
|---|---------------|
| 3 Total Operating Revenues (From Page W-2) | |
| <u>Operating Expenses</u> | |
| 4 Salaries & Wages (From Page 7) | |
| 5 Employee Pensions and Benefits | |
| 6 Purchased Water | |
| 7 Plant Operations Expenses (From Page W-3) | |
| 8 Billing Expenses | |
| 9 Supplies and Expenses | |
| 10 Transportation Expenses | |
| 11 Rent Expense * | |
| 12 Insurance Expense | |
| 13 Outside Services Employed (ie., Legal, Accounting, etc.) (From Page 8) | |
| 14 Regulatory Commission Expenses | |
| 15 Uncollectible Expenses (From Page 6) | |
| 16 Depreciation Expense (From Page W-6) | |
| 17 Amortization of Contributions in Aid of Construction (Page 9) | |
| 18 Amortization Expense | |
| 19 Tax Expenses (From Page W-3) | |
| 20 Interest Expense (From Page 10) | |
| 21 Other Expenses * | |
| 22 Total Operating Expenses | \$ |
| 23 Net Income (Loss) | \$ |

* Please attach a detailed explanation for these items.

2 Company Name: _____

WATER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)

(Please indicate if metered amounts are in cubic feet measurements.)

| (a) | | No. of Customers | | Gallons Sold 000's Omitted (d) | Revenue Amount (e) |
|---------------------------------|--|--------------------------|--------------------|--------------------------------------|-----------------------|
| | | Beginning of Year (b) | End of Year (c) | | |
| <u>Unmetered Sales of Water</u> | | | | XXXX | |
| 3 | Residential - Single Family | | | XXXX | |
| 4 | Residential - Apartments | | | XXXX | |
| 5 | Residential - Mobile Homes | | | XXXX | |
| 6 | Commercial | | | XXXX | |
| 7 | Other Sales to Public Authorities | | | XXXX | |
| 8 | Other * | | | XXXX | |
| 9 | Total Unmetered Sales | | | | \$ |
| <u>Metered Sales of Water</u> | | | | | |
| 10 | 5/8" Meter | | | | |
| 11 | 3/4" Meter | | | | |
| 12 | 1" Meter | | | | |
| 13 | 1 1/2" Meter | | | | |
| 14 | 2" Meter | | | | |
| 15 | Other * | | | | |
| 16 | Total Metered Sales | | | | \$ |
| <u>Other Operating Revenues</u> | | | | | |
| 17 | Late Payment Fees | | | | |
| 18 | Inspection Fees | | | | |
| 19 | Reconnect Fees | | | | |
| 20 | Rent Income | | | | |
| 21 | Income from Merchandising, Jobbing & Contract Work * | | | | |
| 22 | Other Revenue * | | | | |
| 23 | Total Other Operating Revenues | | | | \$ |
| 24 | Total Operating Revenues | | | | \$ |
| | | | | | (Total to Pg. W-1) |

* Please attach a detailed explanation for these items.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

WATER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)

| (a) | Amount (b) |
|---|---------------------|
| <u>Plant Operations Expenses</u> | |
| 3 Repairs of Water Plant - Pump Repair | |
| 4 Repairs of Water Plant - Well Repair | |
| 5 Repairs of Water Plant - Water Line Repair | |
| 6 Repairs of Water Plant - Equipment Repair | |
| 7 Repairs of Water Plant - Other * | |
| 8 Fuel or Power Purchases for Pumping (ie., Electric Bills, etc.) | |
| 9 Chemicals | |
| 10 Water Testing Expenses | |
| 11 Total Plant Operations Expenses | \$ |
| | (Total to Page W-1) |
| <u>Tax Expenses</u> | |
| 12 Tax Expense - Property Taxes | |
| 13 Tax Expense - Payroll Taxes | |
| 14 Tax Expense - Franchise Taxes | |
| 15 Tax Expense - Other Taxes * | |
| 16 Tax Expense - Federal Income Taxes | |
| 17 Tax Expense - State Income Taxes | |
| 18 Tax Expense - Investment Tax Credits | |
| 19 Total Tax Expenses | \$ |
| | (Total to Page W-1) |

* Please attach a detailed explanation for these items.

PUMPING AND PURCHASED WATER STATISTICS

(Omit 000's in reporting number of gallons or cubic feet of water. Use additional sheets if necessary.)

1
2 Company Name: _____
For the calendar year of January 1 - December 31 _____

| 3 4 5 6 7 | Gallons Pumped Into System | Source of Supply (Please describe source below.) | | | | Total of all Methods (a+b+c+d=e) (e) |
|---|----------------------------|---|-----|-----|-----|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | (a) | (b) | (c) | (d) | |
| (Please indicate whether measurement is gallons or cubic feet.) | | | | | | |
| 8 | January | | | | | |
| 9 | February | | | | | |
| 10 | March | | | | | |
| 11 | April | | | | | |
| 12 | May | | | | | |
| 13 | June | | | | | |
| 14 | July | | | | | |
| 15 | August | | | | | |
| 16 | September | | | | | |
| 17 | October | | | | | |
| 18 | November | | | | | |
| 19 | December | | | | | |
| 20 | Total for Year | | | | | |
| | | | | | | |

21 Maximum Quantity Supplied to the System in Any One Day: Minimum:

22 Range of Pressure in the Mains as Measured at the Highest Point on System:

| If Water is Sold to Other Utilities for Resale, List Names, Addresses, Phone Numbers and Quantities Below: | | | | |
|--|------------------|---------|--------------|----------|
| | Name of Reseller | Address | Phone Number | Quantity |
| 23 | | | | |
| 24 | | | | |
| 25 | | | | |
| 26 | | | | |

2 Company Name: _____

WATER UTILITY PLANT IN SERVICE

| Account Description (a) | Acct. No. (b) | Balance Beginning of Year (c) | Additions During the Year (d) | Retirements During the Year (e) | Balance End of Year (C+D-E) (f) |
|--|---------------------|-------------------------------------|-------------------------------------|---------------------------------------|--|
| <u>Intangible Plant</u> | | | | | |
| 3 Organization | 301 | | | | |
| 4 Franchise and Consents | 302 | | | | |
| 5 Miscellaneous Intangible Plant | 303 | | | | |
| <u>Source of Supply Plant</u> | | | | | |
| 6 Land and Land Rights | 310 | | | | |
| 7 Structures and Improvements | 311 | | | | |
| 8 Collecting and Impounding Reservoirs | 312 | | | | |
| 9 Lake, River, and Other Intakes | 313 | | | | |
| 10 Wells and Springs | 314 | | | | |
| 11 Infiltration Galleries and Tunnels | 315 | | | | |
| 12 Supply Mains | 316 | | | | |
| 13 Other Water Source Plant * | 317 | | | | |
| <u>Pumping Plant</u> | | | | | |
| 14 Land and Land Rights | 320 | | | | |
| 15 Structures and Improvements | 321 | | | | |
| 16 Boiler Plant Equipment | 322 | | | | |
| 17 Other Power Production Equipment * | 323 | | | | |
| 18 Steam Pumping Equipment | 324 | | | | |
| 19 Electric Pumping Equipment | 325 | | | | |
| 20 Diesel Pumping Equipment | 326 | | | | |
| 21 Hydraulic Pumping Equipment | 327 | | | | |
| 22 Other Pumping Equipment * | 328 | | | | |
| <u>Water Treatment Plant</u> | | | | | |
| 23 Land and Land Rights | 330 | | | | |
| 24 Structures and Improvements | 331 | | | | |
| 25 Water Treatment Equipment | 332 | | | | |
| <u>Transmission and Distribution Plant</u> | | | | | |
| 26 Land and Land Rights | 340 | | | | |
| 27 Structures and Improvements | 341 | | | | |
| 28 Distribution Reservoirs and Standpipes | 342 | | | | |
| 29 Transmission and Distribution Mains | 343 | | | | |
| 30 Fire Mains | 344 | | | | |
| 31 Services | 345 | | | | |
| 32 Meters | 346 | | | | |
| 33 Hydrants | 348 | | | | |
| 34 Other Transmission and Distribution Plant | 349 | | | | |
| <u>General Plant</u> | | | | | |
| 35 Land and Land Rights | 389 | | | | |
| 36 Structures and Improvements | 390 | | | | |
| 37 Office Furniture and Equipment | 391 | | | | |
| 38 Transportation Equipment | 392 | | | | |
| 39 Stores Equipment | 393 | | | | |
| 40 Tools, Shop and Garage Equipment | 394 | | | | |
| 41 Laboratory Equipment | 395 | | | | |
| 42 Power-operated Equipment | 396 | | | | |
| 43 Communication Equipment | 397 | | | | |
| 44 Miscellaneous Equipment | 398 | | | | |
| 45 Other Tangible Property * | 399 | | | | |
| 46 Total Water Utility Plant In Service | | \$ | \$ | \$ | \$ |
| | | | | | (Total to Pages 4 and 9) |

* Please attach a detailed explanation for these items.

NOTE: All entries should be supported by records that identify the property being added or retired, its location, and its original cost in as much detail as reasonably possible. If adjustments are included in Columns "d" and/or "e", use additional sheets.

2 Company Name: _____

DEPRECIATION RESERVE - WATER UTILITY PLANT

| | Annual Depreciation Rate % (g) | Annual Depreciation Expense (f'g) (h) | Balance at Beginning of Year (i) | Retirement of Property | | | Other Charges (m)** | Balance at End of Year (n) |
|----|---|---|---|---|-----------------------------|----------------------------|---------------------------|-------------------------------------|
| | | | | Book Cost of Plant Retired (j) | Cost of Removal (k) * | Salvage Credit (l) * | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| 32 | | | | | | | | |
| 33 | | | | | | | | |
| 34 | | | | | | | | |
| 35 | | | | | | | | |
| 36 | | | | | | | | |
| 37 | | | | | | | | |
| 38 | | | | | | | | |
| 39 | | | | | | | | |
| 40 | | | | | | | | |
| 41 | | | | | | | | |
| 42 | | | | | | | | |
| 43 | | | | | | | | |
| 44 | | | | | | | | |
| 45 | | | | | | | | |
| 46 | Total*** | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| | | (Total to Pg. 9 & Pg. W-1) | | | | | | (Total to Pg. 4) |

NOTE: Amounts included in Column "j" should be the same as in Column "e" on the preceding page. Also, Annual Depreciation Expense is equal to Column "f" from preceding page multiplied by Column "g" found on this page.

* All entries included in Columns "k" and "l" should be supported by records that identify the property retired and the cost of removal or salvage is as much detail as reasonably possible.

** Report the details for these entries. Use additional sheets if necessary.

*** Annual Depreciation Expense must be calculated separately. This total should be calculated based upon actual in-service and retirement date(s) of new equipment and retirements during the period.

PUMPS

| | Manufacturer and Type (ie., High Service, Well, Standby, etc.) | Capacity | Date Installed | Date of Last Motor Replacement | Date of Last Pump Replacement |
|----|--|----------|----------------|--------------------------------|-------------------------------|
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |

WELLS

| | | Number: | Number: | Number: | Number: |
|----|---|---------|---------|---------|---------|
| 13 | | | | | |
| 14 | Description (ie., Deep, Artisian, Spring, etc.) | | | | |
| 15 | Year Constructed | | | | |
| 16 | Type of Construction | | | | |
| 17 | Type of Casing | | | | |
| 18 | Depth and Diameter of Well | | | | |
| 19 | Yield of Well in Gallons per day | | | | |
| 20 | Chemicals (ie., Provide Type, Cost and Quantities of Each): | | | | |
| 21 | Type - | | | | |
| 22 | Cost - | | | | |
| 23 | Quantity - | | | | |

METERS AND METER SETTINGS

| | Customer Class (a) | Meter Size (b) | Total at Beginning of Year (c) | Total No. of Additions (d) | Total No. Removed or Disconnected (e) | Total at End of Year (f) | Total No. Owned by Customers at End of Year (g) |
|----|-----------------------------|-------------------|--------------------------------------|----------------------------------|---|--------------------------------|--|
| 3 | Residential: | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | Other Customers: | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 10 | Total in Use by Customers | XXXXXX | | | | | |
| 11 | Not in Use (ie., Inventory) | | | | | | XXXXXX |
| 12 | | | | | | | XXXXXX |
| 13 | | | | | | | XXXXXX |
| 13 | | | | | | | XXXXXX |
| 14 | Total Meters | XXXXXX | | | | | |
| | | | | | | | |

STORAGE FACILITIES

| | Type of Storage (ie., Pneumatic, Ground, Standpipes, Elevated Tanks, etc.) (a) | Construction Material (b) | Last Date Painted if Applicable (indicate interior or exterior) (c) | Capacity (d) |
|----|---|---------------------------------|--|-----------------|
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | | |

MAINS (measurement in feet)

| | Kind of Pipe (ie., case iron, galvanized, iron, plastic, etc.) (a) | Diameter of Pipe (b) | Total at Beginning of Year (c) | Total Additions During the Year (d) | Total Removed or Abandoned During the Year (e) | Total at End of Year (f) |
|---|--|----------------------------|--------------------------------------|---|---|--------------------------------|
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | Total Mains | | | | | |
| | | | | | | |

SERVICES AVAILABLE FOR USE (from Main to Property Line)

| | Size and Description by Type of Material (ie., iron, copper, plastic, etc.) (a) | Owned by Utility | | | | Total No. Owned by Customers at End of Year (f) |
|----|---|--|----------------------------------|--|------------------------------------|--|
| | | Total No. at Beginning of Year (b) | Total No. of Additions (c) | Total No. Retired or Abandoned (d) | Total No. at End of Year (e) | |
| 11 | In Use: | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | For Future Use: | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |
| 19 | | | | | | |
| 20 | | | | | | |
| 21 | Total of All Services | | | | | |
| | | | | | | |

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SEWER OPERATING REVENUES, EXPENSES AND STATISTICS

| (a) | Amount (b) |
|---|---------------|
| 3 Total Operating Revenues (From Page S-2) | |
| <u>Operating Expenses</u> | |
| 4 Salaries & Wages (From Page 7) | |
| 5 Employee Pensions and Benefits | |
| 6 Purchased Water | |
| 7 Plant Operations Expenses (From Page S-3) | |
| 8 Billing Expenses | |
| 9 Supplies and Expenses | |
| 10 Transportation Expenses | |
| 11 Rent Expense * | |
| 12 Insurance Expense | |
| 13 Outside Services Employed (ie., Legal, Accounting, etc.) (From Page 8) | |
| 14 Regulatory Commission Expenses | |
| 15 Uncollectible Expenses (From Page 6) | |
| 16 Depreciation Expense (From Page S-5) | |
| 17 Amortization of Contributions in Aid of Construction (Page 9) | |
| 18 Amortization Expense | |
| 19 Tax Expenses (From Page S-3) | |
| 20 Interest Expense (From Page 10) | |
| 21 Other Expenses * | |
| 22 Total Operating Expenses | |
| 23 Net Income (Loss) | \$ |

* Please attach a detailed explanation for these items.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SEWER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)

(Please indicate if metered amounts are in cubic feet measurements.)

| | | No. of Customers | | Gallons Sold 000's Omitted (d) | Revenue Amount (e) |
|---------------------------------|--|--------------------------|--------------------|--------------------------------------|-----------------------|
| | | Beginning of Year (b) | End of Year (c) | | |
| (a) | | | | | |
| <u>Flat Rate Sales</u> | | | | | |
| 3 | Residential - Single Family | | | XXXX | |
| 4 | Residential - Apartments | | | XXXX | |
| 5 | Residential - Mobile Homes | | | XXXX | |
| 6 | Commercial | | | XXXX | |
| 7 | Other Sales to Public Authorities | | | XXXX | |
| 8 | Other * | | | XXXX | |
| 9 | Total Unmetered Sales | | | XXXX | \$ |
| <u>Metered Sales of Water</u> | | | | | |
| 10 | Commercial | | | | |
| 11 | Other Sales to Public Authorities | | | | |
| 12 | Other * | | | | |
| 13 | Total Metered Sales | | | | \$ |
| <u>Other Operating Revenues</u> | | | | | |
| 14 | Late Payment Fees | | | | |
| 15 | Inspection Fees | | | | |
| 16 | Reconnect Fees | | | | |
| 17 | Rent Income | | | | |
| 18 | Income from Merchandising, Jobbing & Contract Work * | | | | |
| 19 | Other Revenue * | | | | |
| 20 | Total Other Operating Revenues | | | | \$ |
| 21 | Total Operating Revenues | | | | \$ |
| | | | | | (Total to Pg. S-1) |

* Please attach a detailed explanation for these items.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SEWER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)

| (a) | Amount (b) |
|---|---------------------|
| <u>Plant Operations Expenses</u> | |
| 3 Contracted Maintenance Expenses | |
| 4 Repairs of Sewer Plant - Pump Repair | |
| 5 Repairs of Sewer Plant - Treatment Repair | |
| 6 Repairs of Sewer Plant - Collecting Sewers and Manhole Repair | |
| 7 Repairs of Sewer Plant - Equipment Repair | |
| 8 Repairs of Sewer Plant - Other * | |
| 9 Utility Bills | |
| 10 Chemicals | |
| 11 Sludge Hauling Expenses | |
| 12 Effluent Testing Expenses | |
| 13 Total Plant Operations Expenses | \$ |
| | (Total to Page S-1) |
| <u>Tax Expenses</u> | |
| 14 Tax Expense - Property Taxes | |
| 15 Tax Expense - Payroll Taxes | |
| 16 Tax Expense - Franchise Taxes | |
| 17 Tax Expense - Other Taxes * | |
| 18 Tax Expense - Federal Income Taxes | |
| 19 Tax Expense - State Income Taxes | |
| 20 Tax Expense - Investment Tax Credits | |
| 21 Total Tax Expenses | \$ |
| | (Total to Page S-1) |

* Please attach a detailed explanation for these items.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

SEWER UTILITY PLANT IN SERVICE

| Account Description (a) | | Acct. No. (b) | Balance Beginning of Year (c) | Additions During the Year (d) | Retirements During the Year (e) | Balance End of Year (C+D-E) (f) |
|---|--|---------------------|-------------------------------------|-------------------------------------|---------------------------------------|--|
| <u>Intangible Plant</u> | | | | | | |
| 3 Organization | | 301 | | | | |
| 4 Franchise and Consents | | 302 | | | | |
| 5 Miscellaneous Intangible Plant | | 303 | | | | |
| <u>Land and Structures</u> | | | | | | |
| 6 Land and Land Rights | | 310 | | | | |
| 7 Structures and Improvements | | 311 | | | | |
| <u>Collection Plant</u> | | | | | | |
| 8 Collection Sewer - Force | | 352.1 | | | | |
| 9 Collection Sewer - Gravity | | 352.2 | | | | |
| 10 Other Collection Plant Facilities * | | 353 | | | | |
| 11 Services to Customers | | 354 | | | | |
| 12 Flow Measuring Devices | | 355 | | | | |
| <u>Pumping Plant</u> | | | | | | |
| 13 Receiving Wells and Pump Pits | | 362 | | | | |
| 14 Pumping Equipment | | 363 | | | | |
| <u>Treatment and Disposal</u> | | | | | | |
| 15 Oxidation Lagoon | | 372 | | | | |
| 16 Treatment and Disposal Equipment | | 373 | | | | |
| 17 Plant Sewer | | 374 | | | | |
| 18 Outfall Sewer Lines | | 375 | | | | |
| 19 Other Treatment and Disposal Plant Equipment * | | 376 | | | | |
| <u>General Plant</u> | | | | | | |
| 20 Office Furniture and Equipment | | 391 | | | | |
| 21 Transportation Equipment | | 392 | | | | |
| 22 Other General Equipment * | | 393 | | | | |
| 23 Total Sewer Utility Plant In Service | | | \$ | \$ | \$ | \$ |
| | | | | | | (Total to Pages 4 and 9) |

* Please attach a detailed explanation for these items.

NOTE: All entries should be supported by records that identify the property being added or retired, its location, and its original cost in as much detail as reasonably possible. If adjustments are included in Columns "d" and/or "e", please explain below. Use additional sheets if necessary.

Explanation:

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

DEPRECIATION RESERVE - SEWER UTILITY PLANT

| | Annual Depreciation Rate % (g) | Annual Depreciation Expense (f*g) (h) | Reserve Balance at Beginning of Year (i) | Retirement of Property | | | Other Charges (m)** | Reserve Balance at End of Year (n) |
|----|---|---|--|---|-----------------------------|----------------------------|---------------------------|--|
| | | | | Book Cost of Plant Retired (j) | Cost of Removal (k) * | Salvage Credit (l) * | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
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| 11 | | | | | | | | |
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| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | Total*** | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| | | (Total to Pg. 9 & Pg. S-1) | | | | | | (Total to Pg. 4) |

NOTE: Amounts included in Column "j" should be the same as in Column "e" on the preceding page. Also, Annual Depreciation Expense is equal to Column "f" from preceding page multiplied by Column "g" found on this page.

* All entries included in Columns "k" and "l" should be supported by records that identify the property retired and the cost of removal or salvage is as much detail as reasonably possible.

** Report the details for these entries. Use additional sheets if necessary.

*** Annual Depreciation Expense must be calculated separately. This total should be calculated based upon actual in-service and retirement date(s) of new equipment and retirements during the period.

1

For the calendar year of January 1 - December 31, _____

2 Company Name: _____

GENERAL INFORMATION

3 Treatment Facilities - Please describe process.

| |
|--|
| |
|--|

4 Was your treatment plant constructed in place or purchased as a package unit?

☐ Yes ☐ No

5 Were your lift stations constructed in place or purchased as package units?

☐ Yes ☐ No

6 What is the designated capacity of your treatment facilities?

| |
|--|
| |
|--|

7 What percent of designed capacity is currently being utilized?

| |
|--|
| |
|--|

8 What is the name of the current operator?

| |
|--|
| |
|--|

9 Please describe the treatment process for liquid waste.

| |
|--|
| |
|--|

10 Please describe the treatment process for waste solids.

| |
|--|
| |
|--|

11 Where is the point of discharge for liquid waste?

| |
|--|
| |
|--|

12 What is the ultimate disposal of waste solids and how obtained?

| |
|--|
| |
|--|

13 List any equipment failures occurring during the year. Please state when failure occurred and briefly describe the failure and corrective measures taken.

| |
|--|
| |
|--|

COLLECTING SEWERS (measurement in feet)

| | Kind of Pipe (ie., Cast Iron, VCP, PVC, etc.) (a) | Diameter of Pipe (b) | Total No. at Beginning of Year (c) | Total No. of Additions During the Year (d) | Total No. Removed or Abandoned During the Year (e) | Total No. at End of the Year (f) |
|----|---|----------------------------|--|---|---|--|
| 14 | Force: | | | | | |
| 15 | | | | | | |
| 16 | Gravity: | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |

LIFT STATIONS

| | Pumps: Name, Size, Type | Location | H.P. | GPM | TDH |
|----|-------------------------|----------|------|-----|-----|
| 19 | | | | | |
| 20 | | | | | |
| 21 | | | | | |

A registered official company representative is authorized to submit this Annual Report in the Missouri Public Service Commission's Electronic Filing and Information System (EFIS) once the form has been completed in its entirety and notarized. All seals must be present, if applicable. After submitting the Annual Report through EFIS, you will receive a BMAR (confirmation) number. Indicate that BMAR number on the original and retain for your records (pursuant to Sections 432.200 through 432.295 RSMo).

Water and/or Sewer

Annual Report of _____

For the calendar year of January 1 - December 31, _____

VERIFICATION

The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath (Notary Public) by the laws of the State in which the same is taken.

OATH

State Of _____ }

}

ss:

County Of _____ }

}

_____ makes oath and says that

Name of Affiant (Company Official/Representative)

s/he is _____

Official Title of the Affiant (Company Official/Representative)

of _____

Exact Legal Title or Name of the Respondent (Certificated Company Name)

that s/he has examined the foregoing report; that to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent.

from _____, _____, to and including _____, _____
Month/ Day Year Month/Day Year

Signature of Affiant (Company Official/Representative)

Subscribed and sworn to before me, _____ in and for the

State and County above named, this _____ day of _____,

My Commission expires _____,

Signature of Notary Public

Missouri Revised Statutes § 392.210 or §393.140

If not utilizing EFIS, the original must be completed in its entirety, notarized (all applicable seals must be present) and mailed to:

Data Center

Missouri Public Service Commission

200 Madison Street, Suite 100

Jefferson City, MO 65101 (P.O. Box 360, 65102-0360)